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#### THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial No.	09/810 387
Filing Date	March 15, 2001
Inventor	Craig M. Carpenter et al.
Assignee	Micron Technology Inc
Group Art Unit	who on reclinology, Inc.
Examiner	D Zandana
Attorney's Docket No.	AAIOO 4550
Title: Chemical Vanor Deposition Apparatuses and Dono	voition Matheda

position Apparatuses and Deposition Methods

#### SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

References - - See attached Form PTO-1449

In compliance with 37 C.F.R. §§ 1.56, 1.97 and 1.98, your attention is directed to the United States patents and other references listed on the attached Form PTO-1449. No admission is made regarding whether all the submitted references are prior art.

This Supplemental Information Disclosure Statement is being filed after the filing of the Request for Continued Examination (RCE) Application and before receipt of the first Office Action. Therefore, no fee is believed to be required. However, in the event that a fee is required for filing this Supplemental Information Disclosure Statement, please charge the fee specified under 37 C.F.R. §1.17(p) to Deposit Account No. 23-0925. Please credit Deposit Account No. 23-0925 with any overpayment of the above fee.

Citation of these references is respectfully requested.

01-FC±1806

Date: 93 New

11/07/2003 WABDELR1 0000<del>0020</del> 01 FC:1806\_

Respectfully submitted.

Reg. No. 44,854 (509) 624-4276

EL979977510

Practitioner's Docket No.

MI22-1559

PATENT

# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Craig M. Carpenter

Application No.: 09/810,387

Group No.: 1763

Filed: March 15, 2001

Examiner: R. Zervigon

For: "Chemical Vapor Deposition Apparatuses and Deposition Methods"

Commissioner for Patents and Trademarks

Washington, D.C. 20231

ATTENTION: Refund Section, Accounting Division, Office of Finance

#### REQUEST FOR REFUND (IMPROPER CHARGE OF DEPOSIT ACCOUNT)

## I. RETURN OF REFUND REQUEST

This is a request for a refund, with respect to the debit to Deposit Account 23-0925, shown on the statement dated November 7, 2003 for the above identified application.

A copy of the monthly statement, in which the error referred to occurs, accompanies this request. A copy of the Ex Post Declaration of Express Mailing, Transmittal Form, Supplemental IDS, Form PTO-1449, Office Communication, mailed on 11/12/2003, accompanies this request.

# CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. 1.8(a))

I hereby certify that, on the date shown below, this correspondence is being:

#### MAILING

deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Palents and Trademarks, Washington, D.C. 20231.

Date: December 5 2003

#### PACSIMILE.

transmitted by facsimile to the Patent and

Trademark Office. 703-308-6778

Structure

XX

Rhonda G. Rambe

(type or print name of person certifying)

(Request for Debit (Improper Credit of Deposit Account)—page 1 of 2)

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12/45/41 PRI 17:02 [TX/RX NO 9035] 4001

## II. FEES CHARGED FOR WHICH REFUND IS REQUESTED

AMOUNT OF REFUND REQUESTED

Improper charge for Supplemental Information Disclosure Statement \$180.00

TOTAL REFUND REQUESTED

\$180.00

# III. EXPLANATION OF WHY CONTESTED CHARGE IS IN ERROR

On November 3, 2003 we filed a Supplemental Information Disclosure Statement.

The Supplemental Information Disclosure Statement was filed before the mailing date of a non-final office action. A Non-Final office action was mailed on November 12, 2003; this would be the first office action after the request for continued examination, filed on August 29, 2003. Therefore, no additional fee is believed to be required.

Please credit Deposit Account No. 23-0925 with the above fee amount.

#### IV. MANNER OF REFUND

Please Credit Account No. 23-0925.

Date: 05 Dec 203

Reg. No. 44,854
Wells St. John P.S.

601 West First Ave., Suite 1300

Spokane, WA 99201-3828 Tel. No.: (509) 624-4276 Customer No.: 021567





#### Deposit Account Statement

Requested Statement Month:

November 2003

Deposit Account Number:

230925

Name:

WELLS ST JOHN PS

Attention:

RHONDA RAMBO

Address:

HUONDA HAMBO

City

601 WEST FIRST AVENUE SUITE 1300

City:

SPOKANE

State:

WA

Zip:

99201-3817

o: 99201-381

	DATE	SEQ	POSTING REF TXT	ATTORNEY DOCKET NBR	FEE CODE	AMT	BAL	
	11/04	56	09641826	MI22-1504	1806	\$180.00	\$14,388.00	
	11/04	57	09951153	MI22-1781	1806	\$180.00	\$14,208.00	
	11/05	9	6600905		1811	\$100.00	\$14,108.00	
	11/06	34	SUBSCRIPTION	ty:	8001	\$3.00	\$14,105.00	
	11/06	66	09641826	MI22-1504	1806	-\$180.00	\$14,285,00	
	11/08	67	09951153	MI22-1781	1806	-\$180.00	\$14,465.00	
	11/06	104	10009893		9204	-\$3.00	\$14,468.00	
(	11/07	24	09810387	M122-1569	1808	\$180.00	\$14,288.00	
	11/07	118	10701696	MI22-2424	1202	\$72.00	\$14,216.00	
	11/10	1	10226894	MI22-2071	1806	\$180.00	\$14,036.00	
	11/10	42	10244122	Mi22-2111	1814	\$110.00	\$13,926.00	
	11/10	43	10244122	MI22-2111	1202	\$162.00	\$13,764.00	
	11/10	44	10244122	MI22-2111	1201	\$258.00	\$13,506.00	
			START BALANCE		SUM OF REPLENISH	END BALANCE		
			\$14,568.00	* 11, 12 <sub>3</sub>	<b>5363</b> .00	\$13,506.00		

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